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ABSTRACT

Conference proceedings of the Vocational Rehabilitation Subdivision Meetings held at the American Association on Mental Deficiency contain discussions of innovative aspects of vocational rehabilitation and mental retardation. In the area of training rehabilitation counselors, George Baroff describes the Mental Retardation Training Institute in North Carolina and Jack Van Vliet examines the use of the rehabilitation counselor intern with potential high school dropouts. An overview of cooperative educational programs and approaches for vocational training of the retarded is provided by Harold Shay. Eduardo Hinojosa examines food service training in an institutional setting, and Jacob and Irma Jaffe suggest traditional and innovative methods of manpower development. An experimental approach called Project Workout which trains the mildly retarded to be institutional attendants is described by Kathleen Orr and Harvey Snyder. (RD)

Innovations In Vocational Rehabilitation And Mental Retardation

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George E. Ayers, Editor

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INNOVATIONS IN VOCATIONAL REHABILITATION AND MENTAL RETARDATION

Proceedings of the Vocational Rehabilitation Subdivision Meetings held at the American Association on Mental Deficiency Conference, San Francisco, May 12 - 17, 1969

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George E. Ayers
Editor

December, 1969

PREFACE

Although significant advances have been made in vocational rehabilitation for the mentally retarded, new challenges are becoming increasingly apparent. The need to meet these new challenges, now and in the future, as well as increase the degree of success already experienced, has stimulated a considerable amount of creativity in program development, research and training personnel in vocational rehabilitation and mental retardation. The Vocational Rehabilitation Subdivision meetings for the 1968 American Association on Mental Deficiency Conference dealt with these major areas. The themes selected for the three Subdivisional meetings were "Innovations in Training Counselors for Providing Vocational Rehabilitation Services to Mentally Retarded and Culturally Disadvantaged Youth," "Cooperative Educational Planning for Vocational Training of the Mentally Retarded," and "Innovative Programming for Vocational Success."

The meetings were successful in disseminating information on recent developments in the three areas mentioned above. In an effort to enable a wider audience to read about the innovations in the field, all participants were asked to submit their papers for publication in a proceedings pamphlet. Only a few of the participants responded, and their papers were included under the respective major areas in which they were presented.

Credit for the meetings and preparation of these proceedings goes to the many persons who participated in all aspects of the program development, participation and publication. Particular credit goes to Dr. William Younie who again organized and developed a successful program for the Vocational Rehabilitation Subdivision.

George E. Ayers, Ed.D.
Chairman, Vocational
Rehabilitation Subdivision

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SECTION I

INNOVATIONS IN TRAINING REHABILITATION COUNSELORS FOR VOCATIONAL REHABILITATION SERVICES TO MENTALLY RETARDED AND CULTURALLY DISADVANTAGED YOUTH

THE MENTAL RETARDATION TRAINING INSTITUTE

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The Mental Retardation Training Institute (MRTI) is a Federal (Rehabilitation Services Administration) and State-supported (North Carolina Department of Mental Health) program of the Department of Psychology of the University of North Carolina at Chapel Hill. Begun in March, 1964, and designated by the Rehabilitation Services Administration (RSA) as a bi-regional training center, the Institute provides short-term training in mental retardation to rehabilitation counselors and members of other disciplines serving the retarded. The Institute is located at Murdoch Center, one of the State's four residential institutions for the retarded in Butner, North Carolina.

The Institute is presently offering two types of programs. The first type consists of single discipline courses for rehabilitation counselors, special education teachers, social workers and others involved in the rehabilitation of the mentally retarded. The second type is a community-focused interdisciplinary-interagency program for members of the many agencies that serve the retarded. Its goal is to provide an interdisciplinary educational experience in order to increase information on mental retardation and to encourage greater communication and cooperation among the various disciplines serving the retarded within a specific community. Consultation to states or agencies wishing to develop similar programs is available.

VOCATIONAL REHABILITATION OF THE MENTALLY RETARDED COURSE

Rationale of Course

The "Vocational Rehabilitation of the Mentally Retarded" course is a six-week course designed specifically for rehabilitation counselors. It is divided into three parts, each of which is two weeks in length; and there usually is a six-month interval between each of the three parts. There are about twenty-five participants involved in the course at any one time. The following material is presented to provide an overview of the program. Since the course is always subject to modification, suggestions regarding its improvement are welcome.

Our goal was to develop an intensive short-term training program in mental retardation which would assist the counselor in providing more effective services to persons with this handicap. In planning for the course, a series of conferences were held with supervisors in order to obtain their recommendations regarding counselor training needs and to discuss some of the major problems associated with the vocational rehabilitation of the mentally retarded. As a result of this planning and the later constant re-assessment of the course, the Institute has developed the following basic assumptions regarding in-service training and the role of the rehabilitation counselor in mental retardation.

1. The professional model of the rehabilitation counselor is still evolving and there is much variation in counselor activities within and between agencies. This role variation exists in every area except for the counselor's ultimate goal - the achievement of a vocationally adjusted client. Because of this, we have found it necessary to develop our own concept of the counselor's responsibilities and role. This concept which is in no way unique characterizes the counselor as both a guidance worker and a counselor who is responsible not only for working with clients but also with the community. There is considerable difficulty inherent in achieving an appropriate balance between guidance and counseling activities. The agencies which employ counselors have traditionally required them to be weighted in the direction of a "managerial" approach to the client. To be successful with the mentally retarded, however, the counselor must give more time and emphasis to a counseling rather than management approach. Stress has been given, therefore, to the development and improvement of counseling skills.

2. The rehabilitation counselor working with the mentally retarded usually focuses on vocational evaluation, training, placement and closure. While this can be appreciated, the counselor also needs to be aware of the resources in the community which can prepare the prospective client to take advantage of the counselor's services. We have reference to diagnostic and parent counseling centers and nursery, day-care, and educational programs. By virtue of his involvement with the young adult retarded person, the counselor is in a position to recognize the academic, social, emotional and vocational skills necessary to vocational adjustment and should work with the appropriate community agencies to help develop the services that will create these skills.

3. The value of our in-service training program would be enhanced to the extent that the learning and living situation increased the likelihood of the counselors discussing with each other the material of the course itself and sharing their previous experiences.

4. Practicing counselors are action-oriented people - pragmatic rather than theoretical. Therefore, it is important that they preceive the course material as congruent with their own job goals. One must, however, avoid limiting course content to only that which the counselor initially sees as "practical" because content which is not recognized as practical at one point in time may become so as the counselor's perception of his own role is expanded. The trainers must also recognize that the counselors generally come not as neophytes but as individuals who already feel some degree of competence. In suggesting methods of improving their skills, one must avoid threatening their sense of adequacy and creating resistance to change.

5. In the development of the course it was deemed appropriate to space the training into three two-week segments because a consecutive six-weeks absence from job and family might be burdensome. Experience thus far has demonstrated to our satisfaction the desirability of spaced training. Intervals between training sessions give the counselors an opportunity to put their learning experience into action, and they return for further training better prepared to incorporate it because of their intervening professional growth. The continuity of the course is partially achieved through a project which is conceived by the counselor and carried out in his home office between training sessions. The project implements the learning experience by having the counselor actually initiate an activity which he believes will help him in his work. To assist him with his project the Institute staff makes at least one visit to the counselor's home state. The effect of all of this is to keep each participant involved in a training program for one complete year.

On the basis of the aforementioned assumptions, the following approaches to in-service training have been stressed. We have tried to create a climate of learning by treating the counselor as a guest as well as a student. This means being concerned with his creature comforts and giving him the sense of personal worth which tends to make him more open to new experience. Much effort is also devoted to generating a group identification since the participants have so much of their own working and living experience to share with each other and because they can use each other as sounding boards for discussion and incorporation of the course material. Since much of this kind of learning goes on outside the classroom, one of our requirements is that all participants be housed in the same facility. In the course itself, small group discussions with group-determined topics are used extensively as well as encouraging discussions in large lecture-type sessions. The sense of group camaraderie is also fostered by a dinner social function which is held during each part of the course.

In addition to using the resources of the individual for the benefit of all through group discussion and group participation, this approach helps the staff and guest faculty to keep more closely tuned to major areas of concern. Small group discussions provide the kind of flexibility in which attention can always be paid to that which is of particular interest at any point in time. Concern for the participants as individuals and as members of a group does not mean that the program is designed for and motivated by special group interests. It does mean, however, that within the framework of a well-structured and carefully planned program there is room for the staff to be responsive to the participants' most acutely felt needs.

Recognizing that practical considerations rule the rehabilitation counselor's daily activities, an in-service training course that aspires to be useful must be kept as practical as possible. But effective practice is based on concepts which may need some theoretical treatment in their presentation. To make "theory" palatable to action-oriented people requires a careful blending of both kinds of presentations as well as a fair amount of actual physical activity. To also help the counselor fit the pieces of the program together, each two-week segment is begun with an orientation. Hopefully, a gestalt is transmitted which helps the participant to "accept" units whose value is not immediately apparent.

A wide variety of educational procedures are used in this course and include lectures, large and small group discussions, live demonstrations, a comprehensive evaluation practicum which includes a team experience, interaction with residents of Murdoch Center and Durham special education students, role playing, films, film strips, one-way vision demonstrations, a visit to a rehabilitation facility which the counselor would not ordinarily have the opportunity to see, and the individual project carried on at home and eventually presented to the group.

Finally, the content of the course itself was selected according to the major phases of the rehabilitation process with special emphasis on the role of the family in facilitating or hindering rehabilitation, on the importance of a vocationally oriented school experience - preferably through cooperative programs, on methods of evaluation of vocational potential, and on the counseling needs of client and family.

The duration of the course is six weeks - given in three two-week parts with six-month intervals between each part. Spaced training makes possible more absolute hours of training. It also creates the likelihood that as a result of intervening growth, each time the counselor returns he can integrate more of the instructional material.

Content of Course

Part I of the course focuses on the nature and causes of mental retardation, its impact on the family, educational services, vocational potential, overview of the rehabilitation process in mental retardation - evaluation, training, job development, placement, follow-up - and planning a project which will be carried on at home during the intervals between training. Part II contains

a practicum in evaluation in which the counselors employ the MacDonald Vocational Capacity Scale in assessing vocational potential and units on "The Helping Process" and Piagetian Theory, motivation, individual and group counseling, vocational counseling, sheltered workshops, and panel of employers. Part III focuses on poverty and mental retardation, project reports, individual and group counseling, facility visits, sheltered workshops, and federal employment of the retarded.

Evaluation of Course

Evaluation of the training course is carried on at several levels. There are daily evaluations of each of the units given and an evaluation of each of the two-week segments as a totality. An examination is given at the end of the first two weeks in order to assess the basic knowledge about mental retardation acquired by the trainee. The examination is also used as a device for encouraging the counselor to read the assigned chapters in the textbook The Mentally Retarded Child by Robinson and Robinson. At the request of RSA, a survey was made of counselors who completed our training in an effort to determine its effect. The evaluation of the value of the training as judged by the counselors' supervisors was almost uniformly positive.

Accreditation

Satisfactory course completion earns the counselor six graduate credits. The course is administered through the University of North Carolina Extension Division, and counselors typically seek to have credit transferred to schools that they are attending for advanced degress. Within the University of North Carolina itself, satisfactory completion of the course by a student in the Rehabilitation Counselor Training Program will count for six credits toward his master's degree while students majoring in Special Education will receive three credits toward their degree.

OTHER COURSES OFFERED TO REHABILITATION PERSONNEL SERVING THE RETARDED

Other courses offered by the Institute include the following.

1. Vocational Evaluation of the Mentally Retarded. (Target group - vocational evaluators; length 10 days)

2. Vocational Rehabilitation of the Mentally Retarded for Counselors with General Caseloads. (Target group - general counselors; length 5 days)

3. Vocational Training for the Mentally Retarded. (Target group - vocational instructors; length 5 days)

4. Psychological Services in the Vocational Rehabilitation of the Mentally Retarded. (Target group - psychologists; length 5 days)

5. Social Work with the Mentally Retarded and Their Families. (Target group - social workers; length 10 days)

6. Introduction to Mental Retardation for Secretarial Staff. (Target group - secretaries in vocational rehabilitation facilities serving the retarded; length 2 days)

7. Administration of Vocational Rehabilitation Projects for the Mentally Retarded. (Target group - administrators; length 5 days)

8. Special Education and Vocational Rehabilitation of the Mentally Retarded. (Target group - special education teachers and counselors in cooperative school programs; length 5 days)

9. A Training Institute for Sheltered Workshop Directors and Vocational Rehabilitation Personnel. (Target group - sheltered workshop directors and related vocational rehabilitation staff; length 5 days)

UTILIZATION OF THE REHABILITATION COUNSELOR INTERN WITH POTENTIAL HIGH SCHOOL DROPOUTS

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A brief review of two typical efforts in the rehabilitation of high school dropouts revealed some interesting practices that had relevance to our project at Devereux. In working with public school dropouts in North Carolina, Operation Second Chance (1) used the aegis of vocational training in a combination with academic training to woo the dropouts back to school. However, in addition to a heavily slanted vocational training program of six hours daily of vocational training and two hours of academic classes, they depended on a considerable amount of personal contact to keep the student enrolled in the program. One interesting finding was that in studying the characteristics of this population they found it difficult to differentiate this population on the dimensions of IQ, achievement and personality from those who stayed in school. The only thing suggested was that this group of dropouts usually left school about the ninth grade for two reasons--failure in school and disinterest in the school program.

In another program in Connecticut, Lane (2) carried out an "after-school program" which offered pre-vocational skill training to three hundred poorly achieving, disabled students. The interesting aspect to this successful approach was the stipulation that the students had to be in regular classes each day that they wanted to attend the after-school pre-vocational classes. This had a motivating effect, besides giving the students concrete evidence of the need to apply themselves in the classes. Improvements in attendance, achievement and staying power were noted.

In the first study the typical approach to working with dropouts was cited, that of offering vocational training on an academic basis. This is usually the type of program we see as a "first-aid" approach, rather than focusing on the school and its program weaknesses as a preventive measure. The second type of program is more of a preventive program, working with poorly achieving students before they become dropouts. What I will describe today as the program we conducted at Devereux agrees more with this type of model. That is, we have been attempting rehabilitation while they are still in school, not <u>after</u> they have left school or "dropped-out."

DEVEREUX'S PROGRAM

As part of the counselor education "establishment," Devereux recently made changes in its rehabilitation counselor internship program. In examining our internship training program we came to the realization that we were not attempting any counselor training with potential school dropouts in their setting. That is, we felt that a counselor trained at Devereux could also work with the problems of potential school dropouts. However, we were not offering training to potential counselors in the environment and setting of the dropouts. We were training counselors in Devereux's setting. We therefore decided to try something new and different in the training of rehabilitation counselors. Before explaining the new program, a few words explaining the old or traditional type of counselor internship seem in order.

Traditional Program

An intern in rehabilitation counseling at Devereux spends a full year in training developing counseling and evaluative skills under supervision with emotionally disturbed and/or mentally retarded adolescents and young adults, usually requiring residential placement. Emphasis in training is placed upon working with adolescent's vocational and educational problems as a part of institutionalization and helping the interns understand the rehabilitation process that is employed to enable Devereux student-patients to overcome their handicaps. There is participation by the intern in the development of vocational plans involving pre-vocational assessment (TOWER), work trials within the institutional setting, job habits training in the sheltered workshop, participation in the Halfway House program and selective job placement in the community.

Until recently all of this type of training was with Devereux's residential students. Within the last three years, the Pennsylvania Bureau of Vocational Rehabilitation has been sending day students for rehabilitation services to Devereux, as part of a work/study program. These students had emotional and/or retardation problems and were usually the type of student in the high schools who were difficult to handle. They are commonly referred to as "squeaky wheels."

With the inclusion of this small amount of community day students in the Devereux vocational rehabilitation program, the interns were offered the opportunity of supervised counseling experiences with these students. We began to realize that, although in some ways they were similar, in many ways the day students presented many different types of problems and learning experiences for the interns. We also came to realize that there were many other students still going to the public schools requiring rehabilitation services.

We formed an opinion that there was a small group of high school students who were going through the public school programs and reaching their senior years without any opportunity to participate in planning for their vocational future. We wondered if most of the students not in the college preparatory, business or vocational-technical curriculum - in other words, the student in the general curriculum, would be able to benefit from rehabilitation counseling services being offered to them in the school program.

It was our observation that these were the students the high school guidance office usually label "hard-to-place." If they graduate, it is usually with a general diploma, usually just barely making it, and the guidance offices find they are unable to help them to find placement. Because they are not able to function in the college preparatory curriculum, they do not require educational career choice guidance. Because they are functioning at too high a level, they are ineligible for the special education curriculum. In other words, they seem to be in-between, both in gaining attention and adequate programming. We described them as "fence-riders." They didn't belong in any existing "corrals" or range of programs, yet we felt they deserved attention. It was hypothesized that this was a group of students in the high school programs that prospective rehabilitation counselors could and should be trained to serve. In other words, more emphasis should be placed on the training of rehabilitation counselors to do preventive work with clients in their own setting, instead of waiting until they "drop-out."

The New Program

The first year we presented our plan to the superintendent of one of the local school districts and obtained his endorsement of the program. We explained to him our objectives and rationale and the commitment we would have to jointly make to develop this experimental program. After he was satisfied that we would be adding to already existing services in the schools as well as supplying our own supervision of the interns, he requested the principal of the high school to make arrangements for us to meet with the school guidance staff. The interns involved also attended the meetings.

Lines of communication, types of cases to be referred for services, and the types of counseling services we would provide were established. One point of concern was raised about what to tell the students and the parents of the students referred for these "special" services. It was decided to treat this as an additional service offered to the students and the guidance staff would be responsible for any questions raised by the parents.

On the first day of the actual program each guidance counselor met individually with the interns and their supervisors and reviewed the caseloads of the counselors. Lists of prospective clients were made which consisted of seniors who were known or suspected to have unresolved vocational problems. We concentrated upon seniors who were in the general track because it was felt that they deserved the most attention. The interns and their supervisors then interviewed the referred clients and reviewed their case records. Groups and individual counseling caseloads were established in order to evaluate the effectiveness of both approaches. An intern and his supervisor served as co-leaders in the groups. Besides helping the client in both group and individual counseling to develop vocational plans, they also were helped directly and indirectly to appreciate the value of remaining in school the full year. In the case of senior high students, this led to graduation.

One of the developments we were able to help the school staff with was a referral system for students in the caseload who possessed emotional problems too serious to be reached with our program. They were referred for evaluation and subsequently therapy to the mental health clinic.

Through the assistance of the guidance office field trips were made with these students to such places as the employment office, local places of employment, the Armed Forces recruiting offices, etc. Planning for the Armed Forces, especially for the males, commanded some attention of the sessions during the year.

In general, this group of students in a general curriculum were assisted to help themselves plan for their vocational future. By being allowed an opportunity, in either group or individual counseling, to examine themselves and develop their vocational self-concepts the seniors in the group receiving services remained in school for their last year of high school and graduated. Two of them even came back to summer school to make up subjects they needed for the degree.

The success of the program was best described by students. At the end of the year we asked them to evaluate their experiences in the program. The only criticism they had to make was that they wished they had had this type of program earlier in their high school careers. This seemed to tell us something which we kept in mind for the second year of operation.

In our second year of operation we added a second high school with a slightly different emphasis to the program. In this school we were more concerned with working with students at lower grade levels, although we still had some seniors in the caseload. Counseling cases were referred mostly from the lists of truants, students receiving suspensions for rule infractions and underachievers. In other words, we were working with a larger segment of potential school dropouts. Again, as in the previous school, one day a week was spent in the public school by the interns and their supervisors. In working with the larger segment of potential school dropouts, the interns found that it called for more emphasis on working with attitudes. The interns came to appreciate that distortions that could be formed by students in their attitudes could potentially destroy what was otherwise adequately functioning ability. It is true that they saw this with the Devereux residential students, but they would have never developed such a keen appreciation of the processes that help to distort attitudes of public school students. In other words, by working in the public school environment with the students and their problems, they came to realize the amount of problems a school creates for students.

Naturally, the schools benefited those who remained flexible as we were able to function in many ways as consultants on the potential school dropouts. Some of the academic procedures have not changed, but additional services and areas of focus have been created.

Gains to the Intern

As this was an experimental program, we were unsure of its effects upon the interns. They had come to Devereux to receive intensive, supervised training with emotionally disturbed and/or mentally retarded adolescents and young adults in a residential treatment program. We still continued them in their training in the Devereux setting with the exception of one full day a week in the public schools. The outstanding gain noted by the interns

was the knowledge gained by the contrast offered between the Devereux students and the public school students. They came to appreciate the problem of defining normal emotional adjustments. They became more sensitive to the developmental needs of adolescents. Of course, their skill as a counselor was enhanced by the awareness of how essential the proper environmental manipulation can be in the rehabilitation of adolescents with problems of adjustment in and out of public schools. However, the outstanding result obtained was an awareness of the value of preventive rehabilitation counseling, especially when working with the school dropout problem.

Additional benefits have been gained by our entire group of interns, as it has been a sharing experience. In the weekly seminar on individual and group counseling the interns in the public school program would bring back experiences, case material, and the client problems. Thus, in discussing these types of clients with the Devereux staff all of the counseling interns were able to gain knowledge of this type of client.

CONCLUSION

At Devereux we are now more firmly convinced that rehabilitation counselor training programs should be developing programs to train counselors to function in the public school setting as an orientation to the value of preventive rehabilitation with the school dropout. The public schools would not be resistive to this move and would, in fact, welcome the help and special expertise that our profession could give them. We are continuing this program with the aim of exploring ways which we hope will be the best ways of counseling with the "hard-to-reach," potential school dropouts in public schools. Then, hopefully, we will be in a position to offer training to interested guidance workers in the best techniques.

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SECTION II

COOPERATIVE EDUCATIONAL PLANNING FOR VOCATIONAL TRAINING OF THE MENTALLY RETARDED

COOPERATIVE IN-SCHOOL REHABILITATION PROGRAMS - AN OVERVIEW

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This panel on "Cooperative Educational Planning for Vocational Training of the Mentally Retarded" was organized with two different but closely related purposes in mind. First, there was the desire to recognize and give proper credit to cooperative in-school vocational rehabilitation programs which have contributed significantly to make the educational experiences of mentally retarded youth throughout the country more relevant to their adult life demands. The cooperative school programs have been far more widely accepted than is generally realized and have proven themselves both in terms of program achievement and economics. In spite of this, however, they have received very little recognition by the public in general and even by many professionals working with mentally retarded children and youth.

The second purpose of the panel was to discuss the Vocational Education Amendments of 1968 which have such a significant concern for providing vocational education for the handicapped. Up until now, cooperative school programs, with few exceptions, have been limited to special education and vocational rehabilitation. The new Vocational Education legislation seems to ensure that vocational education will play a significant role in all the future vocational programming for the handicapped. Moreover, it seems likely that the very quiet revolution which special education has experienced as a result of vocational rehabilitation participation in school activities will enter a new phase when the vocational education resource becomes available. Both the Office of Education and the Social and Rehabilitation Service find this an especially timely opportunity to renew their commitment since the new school year in the fall will mark both the tenth anniversary of the cooperative school program and the first year in which the new vocational education program will be in effect.

THE REHABILITATION COMPONENT

Most of you are familiar with the dramatic growth of rehabilitation programs for the mentally retarded and the sharply increasing number of mentally retarded persons being rehabilitated by the State vocational rehabilitation agencies. In fiscal year 1967, 17,700 mentally retarded persons were rehabilitated and, according to our early end-of-the-year estimates, we felt that approximately 19,500 would be rehabilitated in fiscal year

1968. This estimate was based on a sample of selected states. Although it showed an increase in total number, it seemed to indicate a slow-down in the rate of increase for the mentally retarded. Such a slow-down would be understandable in view of the simultaneous development of special programs for the mentally retarded throughout the country a few years back.

We recently received the actual number of mentally retarded rehabilitated in fiscal year 1968. It seems that, instead of the 19,500 we had estimated, we rehabilitated 21,775 mentally retarded persons. Thus, we find that there had been no slow-down in vocational rehabilitation services to the mentally retarded. Our early estimate was wrong because we failed to recognize the extent to which State vocational rehabilitation agencies are participating in cooperative school programs.

Vocational rehabilitation efforts on behalf of the mentally retarded usually involve either assigning counselors to special caseloads, extensively utilizing rehabilitation facility resources, or developing and implementing cooperative school programs. The cooperative school approach has become by far the most important of these techniques and approximately 55% of our mentally retarded clients are now referred by educational institutions.

Vocational rehabilitation has, of necessity, had long experience in working cooperatively with other agencies and probably touches directly on more related programs than any other similar agency. In-school rehabilitation programs are just one type of this cooperation. There are similar cooperative ventures in other types of institutions, such as mental hospitals, State schools for the mentally retarded and correctional institutions. Cooperative school programs, however, represent a particularly close type of cooperation. These programs developed because the schools were not adequately meeting the needs of the mentally retarded and few were being prepared to meet the demands of adult independent living. Vocational rehabilitation, on the other hand, was aware that mentally retarded referred for vocational rehabilitation services had generally been exposed to many years of frustration and failure. Their poor work habits and ignorance of the demands of the world of work made them unlikely candidates for successful vocational rehabilitation. It was recognized that success on the job depended far more on the development of appropriate work habits and personal and social skills than on the mastering of academic or specific vocational skills. It was obvious, therefore, that the most important need was to orient these mentally retarded young people as early as possible towards vocational goals. Early rehabilitation intervention in the schools was seen as the best way to provide this orientation as well as to strengthen the school program for the retarded.

IN-SCHOOL REHABILITATION PROGRAMS

In-school rehabilitation programs are generally based on certain premises. The first one holds that the handicapped adolescent whose school history holds little promise of academic success needs, by this very token, to be retained in school and provided with <u>special</u> experiences that will prepare him for success in the world of work. Furthermore, for those students who

fare poorly in the academic setting, the world of work itself has to become a "classroom" which may be either inside or outside the school building.

It is generally believed that for such students school programs should discontinue the typical formal departmentalized school program and develop programs focusing upon vocational orientation, integrating studies in language arts, math, social studies and science with the students' on-the-job experience.

To put these programs into effect--utilizing a cooperative approach--requires combining activities which have some basic philosophical distinctions in spite of their traditional intimacy. Education, for example, is presumably available and even mandatory for the young. Vocational rehabilitation, on the other hand, is characterized by a selectivity of clients and is available only for those who have been determined to be eligible under the three basic criteria of eligibility. First, there must be a physical or mental disability. Secondly, there must be a substantial handicap to employment. Thirdly, there must be a reasonable expectation that providing vocational rehabilitation services to an individual will result in his becoming employable.

In vocational rehabilitation the participation of the client is usually voluntary as distinguished from school attendance which up to a certain age is not. Furthermore, the vocational rehabilitation approach is generally geared to short-term contact with definite, identifiable goals while the school experience extends over a number of years. Because of the strength of the common goals of vocational rehabilitation and education, it has been possible to make adjustments in the two programs to compliment each other. These adjustments have occurred in a number of different ways.

TYPES OF COOPERATIVE REHABILITATION PROGRAMS

One approach involves the full integration of the vocational rehabilitation concept within the academic framework. In this approach which is generally known as the Texas plan, occupational education and vocational exploration are introduced at the junior high school level. Work stations are set up on the school campus to give the retarded students the opportunity to explore different vocational areas. In high school the emphasis is on job training and employment. The training stations set up on campus are extended to include training opportunities in the community, and the students receive actual on-the-job training. The students are placed in employment while still in school and are considered to have completed school when they have been steadily employed for a sufficient period of time.

The vocational rehabilitation counselor provides vocational rehabilitation services while the special education teacher assumes a community-focused role--helping the student adjust to the world of work, learn a job and develop the vocational, social, and academic skills necessary for employment. While performing rehabilitation functions, the teacher acquires a new job title and may be called a vocational adjustment coordinator and for that portion of his time spent in vocational rehabilitation the teacher actually becomes an employee of the State vocational rehabilitation agency.

Another type of cooperative program is the laboratory type. In this approach after classroom work has been completed or on a part-time basis simultaneous with the academic classroom work, the student is assigned to an on-campus vocational laboratory setting for vocational evaluation, work adjustment, and training. This may be either a separate school building set up specifically for this purpose or a special room within a school. Here vocational evaluation studies are conducted to evaluate such things as the student's educational achievements, work experience, vocational attitude and interests, intellectual abilities, personality characteristics, attitudes, personal and social adjustment, and employment opportunities. Some kind of work adjustment experience is also provided to develop the student's work attitudes, work habits, work tolerance, and social and other behavior patterns suitable to prepare him for training and future job performance. In this kind of program the student either spends part of the school day or a block of the school semester in a sheltered workshop setting and the vocational rehabilitation agency and community facility coordinate their services to reach a common goal.

In some communities the vocational rehabilitation agency has developed another approach by establishing comprehensive rehabilitation facilities right on the school campus to provide the full range of vocational rehabilitation services to serve all the handicapped students.

VALUE OF THE VARIOUS COOPERATIVE APPROACHES

Regardless of the type of approach used, the emphasis of the academic program is on practical learning. Reading and language development provide efforts to increase thought and feelings relating to other people, and understanding and reacting to the communications of others. Social studies stresses the role of the individual in family, school, community and nation and the interaction of people living and working together. Mathematics provides a well-rounded knowledge of the functions and processes needed in the student's everyday life. The supplementary training programs in areas such as industrial shop, home economics, commercial subjects, pre-vocational training, and arts and crafts are organized to give the student an introduction to the basic skills in the work of his choice and prepare him as well in attitudes, personal habits and interpersonal relations. The school provides its traditional program of public education, including academic instruction, library services, health and physical education services, transportation for school attendance, and up until now, vocational services of a general nature, such as homemaking, manual arts or vocational agriculture. The Vocational Education Amendments will make possible greatly expanded vocational programming for the mentally retarded.

Similarly, no matter which approach is used, the vocational rehabilitation agency provides those services for which it is legally responsible. This includes the diagnostic procedures, rehabilitation counseling, medical restoration and social services, pre-vocational and vocational and personal adjustment training, maintenance, transportation, and job placement. As a result of the Vocational Rehabilitation Amendments of 1968, services have been extended to family members of the client. This encompasses

whatever kind of service might be needed by the family member, as long as there is an indication that providing the service will make a substantial contribution to the rehabilitation of the client. Also included are follow-up services--for as long as necessary even after the client has been rehabilitated and the case closed--in order to help the person maintain himself in employment.

The number of ways in which special education and vocational rehabilitation, and in a few cases thus far vocational education, have adjusted to each other's programs has been excellent and represents such wide diversity that to some people these arrangements quite frankly seem unorganized. Yet, this apparent factor is really a prime virtue of cooperation in practice, for it reflects the fact that vocational rehabilitation, special education, and vocational education recognize that they are all charged with overlapping areas of responsibility.

Distinct boundaries between these three programs exist neither in educational or rehabilitation practice nor in legislative authorities. Furthermore, we do not want artificial boundaries to be created or professional practices to become calcified simply in order to develop nationally consistent programs. Sameness is simply not the pattern of American education. The success of our in-school rehabilitation programs has been due largely to our flexibility of approach and willingness to adapt to local needs. This means that what has traditionally been provided by special education within a community is considered to be special education in that community, and vocational rehabilitation complements the traditional local special education program in order to create a fully organized program.

Vocational rehabilitation's participation in a school program requires that both the school activity and the rehabilitation services be improved through the introduction of new patterns of services. Such services should be those that would not be available to the handicapped student without the involvement of the vocational rehabilitation agency.

As a result of our flexibility, the variety of approaches is extraordinary. In some states there is a statewide agreement covering the cooperative program in all the school districts. In other states there are agreements with individual school districts. In some states only mentally retarded students are involved and in others, physically handicapped, blind, emotionally disturbed, minimally brain injured, deaf and other handicapped youngsters are being served. Also, in some states programs have developed primarily in smaller communities. In others an emphasis on handicapped inner-city youth is becoming increasingly evident. In some states vocational education has been involved and in others the cooperative program has been limited to special education and vocational rehabilitation. In some states only available school resources are utilized. In others substantial alteration of school buildings has been provided with vocational rehabilitation funds.

AFFECT OF VOCATIONAL EDUCATION AMENDMENTS ON IN-SCHOOL REHABILITATION PROGRAMS

Because these opportunities for cooperation offered by the Vocational Education Amendments are so very broad, it is clear that the apparent existing disorder of the in-school vocational rehabilitation programs will become even more pronounced. It is also clear that the primary difficulty which has characterized the cooperative programs thus far will become far more obvious in the early years of bringing vocational education into the cooperative team. This is simply a problem of communication. We find, even today, that special education and vocational rehabilitation practitioners do not necessarily mean the same things when they use the same words and they can go into cooperative programs with different expectations and perceptions of appropriate roles for both themselves and the cooperating other agency. But vocational rehabilitation and special education share at least a common concern and responsibility for the handicapped. Vocational education exposure to the handicapped has been limited and it is up to the vocational rehabilitation and special education practitioners to help vocational educators understand the capabilities of the retarded in order to plan appropriate programs for them.

REACTIONS OF PROFESSIONALS TO THE IN-SCHOOL REHABILITATION PROGRAMS

It wouldn't be fair not to point out some of the criticisms of the cooperative approach made by people actually working in these programs. It was interesting to note in a recent survey of practitioners in both vocational rehabilitation and special education that the vocational rehabilitation staff generally appeared to be more positive than the special educators in noting that the cooperative programs had somehow improved school services. The special educators complained most of all that guidelines for the program were too flexible and tended to represent the thinking of vocational rehabilitation but not of special education. Next, they complained that there were not enough vocational rehabilitation staff around with whom they could work. They also made several specific complaints which seemed to indicate a general lack of communication and understanding between special education and vocational rehabilitation. The special educators indicated that "vocational rehabilitation takes the kids too young or too old," "vocational rehabilitation counselors want to supervise but don't want to place the kids in jobs," "vocational rehabilitation wants to go it alone too much," etc. It seems clear that special educators do not thoroughly understand the vocational rehabilitation program and its philosophy.

The vocational rehabilitation counselors, on the other hand, complained that there wasn't enough special education staff around with whom they could work. In this context they also meant that the special educators who were around were too rigid, especially about curriculum and didn't understand or care about the vocational future of the students. Next they complained, as did the special education teachers, about the lack of adequate vocational rehabilitation staff. They recognized that they were not giving the schools proper coverage. Finally, they expressed the same kind of general concern as the special educators about interagency cooperation breaking down because of communication difficulties. The vocational rehabilitation counselors sensed, for example, that cooperation breaks down because special education is often insecure in its own schools. They felt that special education directors do not have enough authority to establish or enforce cooperative programs.

In spite of these communication problems, what has been the result and what have we learned thus far? We have learned that the approach of cooperation and collaboration does work and is successful. From different follow-up studies we find that handicapped youngsters involved in these programs tend to remain in school longer, reducing the drop-out rate. There has been a significant increase in job placement by vocational rehabilitation agencies. Our program has often provided a stimulus for the establishment of high school special education classes in many communities which had previously been without them.

We have learned how important it is to plan before the initiation of a program. This will be especially significant in developing the new vocational education programs. The widespread existing special education-vocational rehabilitation activities might be disrupted unless an orderly planning process is undertaken acknowledging the resources of these existing programs. We have learned the importance of contact at an early age for vocational rehabilitation and the importance of parental involvement as well as that of community agencies and employers.

Finally, we have learned to see terminal education programs as a bridge rather than a terminus. Some people think the purpose of in-school rehabilitation programs is to get these youngsters with special problems out of school as quickly as possible. It makes no sense to expect the handicapped adolescent to be ready for community responsibilities at a younger age than his non-handicapped peers. By developing our in-school rehabilitation programs, we hope we have learned how to keep these young people in school until they are really able to make an adequate and successful transition to the world of work and to hope for a successful future.

SECTION III

INNOVATIVE PROGRAMMING FOR VOCATIONAL SUCCESS

FOOD SERVICE TRAINING IN AN INSTITUTIONAL SETTING: BEHAVIOR VS. LEARNING

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On October 16, 1967, the Division of Vocational Rehabilitation (DVR) of the Texas Education Agency assigned their counselors at the Austin State School to train residents in the art of food service. This training program was envisioned as becoming a model program which could be replicated by other State institutions. The school administration, local food service employers, and the Executive Director of the Texas Restaurant Association and its membership enthusiastically supported this program. More specifically, the project called for training retardates by following a curriculum in "Ware-Wash Training, Sanitation and Safety" which was developed by Mrs. Gloria Hall of the Owatonna State School in Minnesota. This curriculum had to be modified because it did not include some job skills, such as bussing tables, nor did it put any emphasis on the type of social behavior that would be required for proper job placement.

ORGANIZATION OF PROGRAM

The first class was composed of twelve trainees, ranging from 17 to 40 years of age. The instructor for the introductory portion of the program was a key person in developing the project into its permanent form. Because of the newness of the program, the Texas Education Agency entered into a training contract in which the Texas Restaurant Association paid the instructor. Our commitment in turn was to complete a training program that the Texas Restaurant Association could endorse. This arrangement was the most feasible thing to do, with the eventual placement of these residents in mind.

The rehabilitation counselor would, on each individual case, issue a requisition to the Texas Restaurant Association to cover one-twelfth of the total monthly salary for the instructor. It is hoped that before long there will be an instructor hired on a permanent basis by DVR to conduct these classes on a routine basis.

The pilot training program was conducted in the kitchen of the Austin State School Annex. The Annex Campus houses approximately 350 residents. Its dining room contains thirty-five tables seating six each. The dishroom houses a 2-Tank Hovart machine and the kitchen has a 2-tank pot washing sink. Classroom instructions were held in the afternoon from 3:15 to 4:30. During this period the group met either for film and discussion or were assigned by

the instructor to various locations in the training area to receive first-hand instruction and experience. From 4:30 to 4:45 the class was given a break, and from 4:45 to 5:15 the trainees had dinner. The class meals were served on china rather than the regular institutional metal tray. Students were encouraged to use acceptable table manners. Those trainees who had previously eaten on metal trays were extremely responsive and receptive to learning acceptable manners and eating with the proper eating utensils and on china plates. From 5:15 to 7:15 the trainees worked at the variously assigned work stations in the dining room facility.

The curriculum consists of 160 hours of combined classroom and on-the-job training activity. The first three classes were conducted in a manner which we thought would benefit the trainee better, that is, half a day, five days a week for eight weeks. This approach did not work out as expected primarily because of the instructor not being able to determine the trainees' individual work tolerance. The classes are now conducted on a regular eight-hour day for four weeks. Upon graduation, a certificate is presented to the graduating trainee and is endorsed by the Texas Restaurant Association, DVR, the instructor and the Austin State School.

CLIENT EXPERIENCES

Some experiences that were recorded by the rehabilitation counselor and the classroom instructor were somewhat typical of a retardate in a learning situation. There was a 27-year-old man who was, in the eyes of anyone, clean cut and who held a positive attitude toward his job and training. This individual had no previous work experience with off-campus jobs, but had worked on several on-campus training stations. Reports previous to his enrollment in the training program were that he was extremely efficient and quite responsive to supervision. Most of the job assignments while undergoing training were within his capabilities, but his speed was not always suitable. While he is still somewhat insecure, he is working off-campus and is gradually becoming increasingly more independent.

There was another 17-year-old man who, at the time of training, was handicapped with a history of seizures, but due to medication these seizures are kept under control. This young man apparently had more of a desire to succeed than any of the other trainees in his class. This in itself sometimes presented a very annoying problem to his peers and the instructor. His continuous need for positive reinforcement presented a very irritating problem to all who were around him. With the cooperation of the classroom instructor, caseworker, and psychologist, the rehabilitation counselor was able to curtail this problem to a minimum by the time the trainee was graduated from the program. He has become more and more self-reliant on his own merits, and no longer has to be patted on the head or shoulders every time he does something that is expected of him on the job, in the dormitory, or in any other group situation.

Our oldest trainee in the program was a man approximately forty-six years of age. We considered him to be more of a risk than the others because of his long institutionalization status. However, he turned out to be one of our best students. He proved himself to be a steady worker who would

not ever quit the job until all the work was done and who would become a bit irritated if he saw other trainees neglecting their job duties. This attitude motivated the younger trainees. This student's quality of work and favorable work habits were a good influence on this whole class. He had been in an institution for approximately thirty years of his life and had never held a job off campus until after he was offered a chance to be trained in a certain field. He is now living in a halfway house and is well on his way to becoming self-sufficient.

RESULTS AND DISCUSSION

Of the 58 residents who were enrolled in this program, 42 or 72% are now employed. This includes seven trainables (IQ 35-50) who were employed on campus at the Travis State School at the time this report was prepared. They were considered successfully employed because it is felt that this level of employment represents a realization of their highest work potential. The sixteen failures in the program represent 28% of the class. Only two of these failures can be primarily attributed to mental retardation. The other fourteen failed because of behavior problems.

We were interested in seeing if some measure could discriminate between those trainees who were successfully employed and those who were not. That is, we were interested in a method of predicting success and failure. We, therefore, decided to take a sample of ratings written in a descriptive manner by the trainers asking the trainer to give the trainee a rating in terms of the probability of success from 100% to 0%. Trainers rated 24 of the trainees in a descriptive evaluation at the end of training. They predicted failure for eight and success for seven, and made no prediction at all for the other nine trainees. Of the seven for whom success was foreseen, only five were able to meet the criterion of continued employment for three months or longer. Of the eight predicted to fail, only four failed. Of the nine on whom no predictions were made, four are employed, five are unemployed. This nets a failure by the trainers to predict job outcomes in 15 out of 24 cases, which is less than a chance prediction rate. For example, six residents who had been predicted to fail by the trainer were not only successfully employed, but were discharged from the institution within approximately six months after graduation.

Age, IQ, and length of institutionalization were considered as possible predictors. It was found that the unemployed group had a significantly higher mean IQ (64.15) than that of the employed group (58.19). The difference between the means yielded a t of 6.59, which with 56 df, was significant at the .001 level.

The age of the employed was significantly higher than that of the unemployed with means (in years) of 25.55 and 20.00 respectively ($5 = 7.17$; 56 df, $p > .005$).

Because of the feeling that adaptive behavior, rather than IQ or age alone, would be a more meaningful predictor of job success, Adaptive Behavior Scales were obtained for 38 trainees in this study. All were residents at the Austin State School. This scale, developed at Parsons, Kansas, State Hospital

and Training Center, is divided into two parts, the first containing ratings on independent functioning, physical and sensory development, economic activity, language development, number and concept, occupation (general), self-direction, responsibility, and socialization. The second half of the scale is concerned with negative behavioral qualities such as violence and destructiveness, anti-social behaviors, rebelliousness, trustworthiness (negative), socially unacceptable manners, withdrawal, stereotyped behaviors, self-abuse, peculiar and eccentric habits, sexual aberrations, psychological disturbances, and need for medication. These ABS ratings were filled in by the trainer.

The group of 38 trainees was subsequently divided into 23 who met the criterion for successful placement (three months or more of employment), and 15 who could not keep the job on which they were placed. The ABS ratings for the two groups were analyzed by a discriminate function analysis. Two ratings (stereotyped behavior and self-abuse) were discarded for this analysis because they contained no variance. The remaining 19 variables plus the variable of IQ produced an F ratio of 2.18, 1/17 df, the probability level lay between $10 > p > .05$. While this is a weak level of significance, it approaches that level generally accepted as statistically different, and it is certainly better able to distinguish between the two groups than trainers' descriptive evaluations. This analysis produced an overlap or failure to predict success for only four trainees in the two groups. These twenty values of the total scale plus the discriminant function values of this scale were intercorrelated. Most closely associated with those values which discriminated between the failures and successes were the following variables:

1. Language development
2. Number concepts
3. Occupation
4. Self-direction
5. Responsibility
6. Socialization

All are from Part I of the scale. Only measures of rebelliousness and trustworthiness were highly correlated with the discrimination function values of Part II. This simply means that these measures are the ones which most clearly distinguish between employed and unemployed students.

To some extent we want to be cautious in the interpretation of this data because it was obtained on a very small sample, and although the level of significance of these correlations is the .01 level, still a multiple correlation of this type would produce a number of such significant associations by chance alone.

Part I of the scale taken alone discriminated between the employed and the unemployed much better statistically ($F = 3.59$, 9/28 df, $p < .005$) than the total scale. However, there was a greater overlap between the two groups.

The first section alone would have predicted between 17 of 23 successes and 10 of 15 failures. The second section of the scale taken alone did not produce a significant F ratio (F = 1.17).

One reason for the independent functioning section of this scale being more efficient in predicting failure may be that the second half which is concerned with deviant behaviors is not sensitive enough when it comes to predicting bad behavior. It may be accurate enough for assessing behavior already manifest, but not sensitive in detecting potential behavior deviations. It well may be that the retardate who is placed in a stressful situation and who does not have the skills which would enable him to cope with stress such as he may find on the outside, would be prone to blow up on the job. This interpretation reconciles the fact that, while the skills section of the scale is the best predictor of success, most of the failures were due to behavior problems.

The implications seem to be clear that the systematized use of a check list such as the Parsons Scale would be a better predictor of success on the job than either a trainer's evaluation or the IQ level of the trainee when taken alone.

TRAINING POWER: OLD AND NEW APPROACHES TO MANPOWER DEVELOPMENT

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The changes required to meet the manpower needs in the field of retardation, as elsewhere, are going to have to be basic, radical changes coming quickly and in some instances conflicting with vested interests. Current manpower shortages stem from several causes, such as the expansion of services, the limited numbers of educational training programs, poor recruitment from the existing pool of professionals, non-productive ways of using staff, and inefficient and archaic delivery systems.

ESTABLISHING REGIONAL TRAINING CENTERS

To overcome these problems will require much creativity and a coordinated approach. The way we are suggesting is to establish a coordinated, cooperative training center within a defined region, having a small permanent staff whose responsibility it would be to work with all federal, state, municipal, voluntary and educational agencies to develop recruitment, pre-service, in-service, and other types of training. In addition, the Center would serve as a liaison for coordinated research from the educational institution to the agencies and vice versa.

Such a coordinated, overall approach is imperative to remove training from the traditional and fragmented current practices which see service and personnel through tunnel vision. Coordination can best serve both the needs of the agencies providing services and the staff being trained, giving the trainees the skills required for flexibility in vocational movement, vertically and horizontally. The training programs would involve all levels of personnel - administrators, professionals, para-professionals, and the retarded themselves.

The Center would be responsive to our large national social issues, such as

poverty and discrimination. The field of retardation, along with other fields, has a responsibility to (1) respond to the demands for meaningful jobs by the poor, blacks, and Spanish-speaking people, and (2) take the initiative in developing jobs and training programs.

The training center would be the focus for examining the service patterns and training within agencies, the projection of client needs, the implementation of services through regional plans, and the availability of educational institutions and training agencies. This training center would have an overall perspective of the whole field and of all its component parts and would be in an objective position to do this by not being attached to any institution and agency - thus avoiding the parochialism of being part of the "establishment."

Career Development

A major task of this regional training center would be to conceptualize new jobs. For example, a systems approach would be used in analyzing what the agency is trying to do, whom it is trying to reach, what other agencies it has or should have relationships with, and how it is using its present staff. Perhaps the most productive way would be agencies cooperatively and non-defensively looking at job tasks and breaking them down into the skills that are required. An examination of client needs may also suggest new tasks or services heretofore unperformed by any agency personnel. This may mean new roles for professionals and certainly new jobs for para-professionals. Some of the new programs in the poverty areas are successfully doing this. Many of us acknowledge that we have not been effective in reaching the poor. Indigenous workers have much to contribute in teaching us how to do this if we allow, encourage, and help develop them. Just bringing them into programs is not enough.

Through analyzing the whole service pattern of an agency, e.g., casefinding, maintaining contacts with clients, follow-up and follow-through of referrals, it becomes apparent that para-professionals can fill gaps in services offering those which are not being done, or done ineffectively, e.g., getting families to appointments, counseling around reality problems of welfare and housing, travel training for the retarded job seeker, job developer, teacher aides, workshop assistants, physical therapy aides, etc.

Still another method is to analyze job skills, e.g., clerical, personal contact, capacity for independence and the need for supervision. Aides should not be considered unskilled appendages of the professional team. They should be viewed dynamically and given the possibility to develop greater skills and become supervisors.

Evaluation of Educational Programs

The Center would have a responsibility to objectively evaluate existing, formal educational programs. In regard to educational programs - especially degree-granting ones - a distinction should be made between credentials and

meaningful preparation for jobs. Recent studies in education and counseling effectiveness suggest that traditional educational programs do not produce effective practitioners. In fact, in counseling, academic preparation reduces effectiveness. Academicians insisting solely on formal academic preparation and degrees should be questioned. Vested academic interests should be made aware that little evidence supports the efficacy of many formal programs. Our academic programs continue more on tradition, on what has been called the rites of passage. However, we do not imply that the baby should be thrown out with the bath water. Meaningful programs should be expanded, and innovative ones tried.

New Training Programs

New training programs would be developed by the Center in collaboration with universities, community colleges, public and private agencies, or by the Center's staff in conjunction with the employing agencies. Training programs should, of course, utilize already existing degree programs, college and extension courses, specially developed orientation and in-service programs, etc. Community colleges and agencies must have more cooperative and flexible programs allowing competent agency employees not having the academic requirements the opportunity to take remedial and regular courses, and where possible, obtain associate degrees. The involvement of unions in such upgrading efforts has already begun and could be encouraged in the field of retardation. Conversely, the graduate with an associate degree should have meaningful jobs available upon graduation. This often means changing job titles, sometimes a difficult task, especially in governmental agencies.

The cooperative training center would be the source of a public relations program which could attract new students and professionals as well as initiate new undergraduate training programs. It would also be the recruiting source for para-professionals.

Volunteers, including teenagers, are an untapped source for attracting manpower. Let us not forget the consumers of services, either. The retarded themselves are presently being used as institutional help, frequently without pay. Selective and imaginative training for the retarded in a greater variety of jobs is indicated. Another source is the parents and families of the retarded, who through their local groups have shown many community organization skills, among other skills.

The developed in-service training skills of para-professionals by an agency should have transferability to other agencies. Training must be relevant It should neither be abstract and esoteric nor condescending and underestimating of the real potential of its trainees. The key to this is the selection and training of trainers.

A role of the proposed training center would be to conduct sequential training programs for all levels of workers, para and professionals, administrators and others. The Center programs would have as objectives developing specific skills, bringing new information and techniques to participants, cross fertilization of ideas and programs, and stimulating interagency

cooperation. The Center would also have the most advanced technological training techniques available, e.g., video tapes, programmed instruction, and computer-assisted instruction. The creation of such a center would enable small agencies which have too few staff for their own in-service training program to have the center provide economical and effective training.

CONCLUSION

We used the words "training power" in our title. For us, training power means a coordinated, cooperative, and creative use of old and new training techniques. We believe we can transform people power into manpower through training power.

PROJECT WORKOUT: AN EXPERIMENTAL APPROACH IN TRAINING THE MILDLY RETARDED AS INSTITUTIONAL ATTENDANTS

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Project Workout, a vocational training program for the community-based mildly retarded, originated at the Woodbridge State School - a New Jersey state-supported residential facility for one thousand severe and profoundly mentally retarded males and females five years of age and over. Following months of preparation and organization with community and state organizations influencing the retarded, it was initiated in November, 1967, through the efforts of Mr. David Rosen, former W. S. S. Superintendent, Mr. Louis Pirone, present W. S. S. Superintendent, Mr. Vinton Smith, former Director of Education, and Mr. Russell Rice, original Project Supervisor. The program was funded for two years in the amount of $156,000 through allocations from the U. S. Department of Labor, Bureau of Apprenticeship and Training, the Manpower Development and Training Act of 1962, and the New Jersey Rehabilitation Commission.

The purpose of the program was to provide training and employment for the mildly retarded individuals who have typically experienced difficulty in obtaining appropriate training leading to secure employment.

SELECTION OF TRAINEES

Trainees were initially screened by the New Jersey Rehabilitation Commission and selected after a person interview by the Project Workout supervisory staff. Personal interviews were conducted with the prospective trainee and his parents. This interview enabled anxieties to be aired and insured that both trainee and parents had an understanding of the operation and goals of the program. Current medical and psychological information was also reviewed.

Until the advent of this program, the retardates being considered had experienced little or no success in the school, social, or work worlds. The educable retardate is a person raised in an environment where his school, family and self are perceived by society as being different. All too often, however, he is expected to achieve the goals imposed on the normal individual. The mildly retarded, therefore, does not have very

realistic goals. When he is prepared for employment, his training may be "special," but his job opportunities are not! Utilizing this knowledge, Project Workout underwent numerous structural changes and emerged a highly functional program for training the mildly retarded for realistic employment.

Many institutions throughout the country utilize higher-level institutionalized retardates to care for lower-level retardates and to reinforce their own working staffs. However, remuneration for this labor, if any, is negligible. The Woodbridge State School, in its continuous effort to live by its policy of non-exclusion for its residents, initiated and developed Project Workout to train and then employ the retarded from the community - in effect, hiring the retarded to care for the retarded.

We did not wish to see either special environments created for the mildly retarded nor to "re-create" them for our environment. We attempted to combine and utilize positive factors from both environments in order to provide the most feasible and beneficial program for those involved, without attempting to "create" or "mold" normalcy where it was not present.

The Mental Retardation Planning Staff, established by New Jersey Governor Richard Hughes' Inter-Departmental Committee on Lifetime Disability (created in June, 1963) recommended "that the Department of Civil Service maximize opportunities for the employment of the mentally retarded in state service." Project Workout has, in reality, effected the recommendations of this committee, through action which was independent of the Department of Civil Service. Workout was designed to train 75 mildly retarded individuals from the community during a two-year period, with the training period of eight months for each group of 25 trainees. At the present time, the final training period is in progress, with more than 75 trainees having been enrolled in the program.

Another criteria for acceptance into the program is age. Trainees must be 17 1/2 years of age or older. Trainees between the ages of 17 1/2 and 20 receive a weekly stipend of $20, and older trainees receive stipends from the New Jersey Rehabilitation Commission according to their individual financial needs. These stipends covered maintenance and transportation.

INSTRUCTIONAL STAFF

Five vocational instructors with the required college background and additional Cottage Life experience work with the trainees five days a week to meet the pressing needs of these people who have been conditioned to failure by previous work experiences. By assigning only five trainees to each of the instructors, we attained a high degree of immediate reinforcement, both in the classroom and during the on-the-job training in the cottage.

TRAINING AREAS

The vocational areas chosen as training grounds were Housekeeping and Resident Care. It was felt that these two areas would provide trainees with job

skills essential to an institution in an area where employee turnover was such that jobs would be available upon completion of the program. The instruction in these areas was developmentally outlined in order to insure that trainees were proficient in one area before they proceeded to a more difficult skill. There were a total of 80 skills to be learned in this manner, and these skills were charted in the classroom area in order for the trainees to be aware of their daily progress. A long-term goal is a difficult conception for the retarded and through the use of this chart, many trainees were able to realistically determine their progress. Although the competition was often keen among the trainees, they each were aware of having to complete the eight months of training prior to employment.

All trainees began learning the areas of Housekeeping following initial orientation to the program and a complete tour of the facilities. Nearly 30 Housekeeping skills had to be mastered prior to work in Resident Care. At first the trainees only wanted to play with the children rather than work on cleaning procedures. This was used as a reinforcer. The faster a trainee satisfactorily completed Housekeeping, the sooner he would be able to work with the children.

The males in the program gradually indicated a major interest in the Housekeeping aspect of the program. It gave them a great deal of satisfaction because the Cottage Life Department needed men to function as building service workers. They soon began to feel that a man's role should involve the heavy cleaning duties and the women should deal with the needs of the residents. This attitude enabled the male trainees to develop job-related concepts and realizations.

Following the completion of Housekeeping, which ranged from mopping floors to use of heavy equipment such as the Clarke Machine, trainees began resident care duties. It should be noted that throughout the training in these areas, institutional policies and procedures were being taught formally and informally. Intensive instruction was provided prior to graduation and employment.

Resident Care was extremely complex in many areas. Many of the trainees had difficulty in reading and writing, but this problem was overcome through extensive discussions, the use of audio-visual aides, and the preparation of Cottage Life where assigned duties would require a minimum of these skills.

EMPLOYMENT OPPORTUNITIES

The present Institutional Attendant starting salary is $4,500 - a salary which none of the graduates could have realistically anticipated without the training received in this program. In one year, these 30 trainee-employees will have earned (not including increments), $135,000. In anticipating that half of the present training class will successfully complete training and be employed, the total salaries earned will be more than $200,000 in one year. This again does not include increments.

Considering the original amount allotted for the program ($156,000) and the percentage of success accrued as a result, it is obvious that in a number

of years the government will realize an appreciable profit on its initial investment. Federally funded projects for poverty, welfare, and mental health and hygiene do not mean squandering of funds and waste of manpower. This project has shown that purposeful use of federal funds can be an asset to the handicapped individual involved, to the federal government in tax return, and to the state government in unemployment and reduction of the welfare rolls. However, there is a fly in the ointment. The two-year grant expires in October, 1969; and, though its success and value are unquestionable, there is no indication that the program will be renewed and continued. What is the purpose of such a program if it is stopped as soon as it is successful? More than fifty mentally retarded young adults have benefited, and from their achievements the government - both state and federal - will benefit, but as we are sure you are all sorely aware, there are thousands of similar individuals who could benefit from such a program and at this time the possibility of their having the opportunity is small. Does it not seem reasonable that a program which has experienced such success should be continued to meet the needs of the thousands of eligible handicapped who could benefit from it?

Many insights were gained from this program. The training of the mildly retarded for the position of Institutional Attendant or custodian or nurse's aide duties was quite facile when one considers the various concomitant problems presented by the trainees. Social and emotional failings and disturbances were the causes of innumerable incidents which had not been anticipated when the project was begun.

Difficulties which arose from concerns and misconceptions of the Cottage Life staff were easily overcome through discussion groups and seeing the trainees at work.

The Department of Civil Service requires that full-time employees be eighteen years of age or older. The eighteen-year-old mildly retarded trainee was, on the average, painfully immature. For those who experienced failure in the program, immaturity was the chief causative factor.

STATUS OF PROGRAM

The program, if it were to be continued, would provide longer periods of training for such individuals. Another need which was quite obvious was a need for sex education. One of the trainees (and please remember the small segment of the population we are considering) due to immaturity and social conflicts which she obviously could not reconcile, became pregnant and was terminated from the program. After the birth of the child, she was re-enrolled and is now nearly ready for employment.

Many of the trainees had difficulty in coping with an environment in which their prospective peers (i.e., fellow employees) were, in the majority, black. Experience at home and school had not prepared them for this new environment, and it was necessary to remove many familial opinions regarding their future fellow employees.

These are only a few of the problems which the program staff encountered and

with which they dealt successfully. Being unique, trial, error, change, and re-evaluation were the by-words for effective functioning of the program. After two years of effort and an unanticipated percentage of success, the program is now operating at an extremely high level of efficiency. Counseling sessions, though the need for such was not originally anticipated, are now provided on a daily basis, and, when serious problems occur counseling is immediately available.

The statistics indicate success. Knowing the thirty graduates personally enables the staff to measure success in innumerable and intangible ways and to fully appreciate the impact of success on the lives of the graduates and their families.

CONCLUSION

This program is presented in order to share with you an effort made with the mildly retarded which was successful. We hope that interest might be aroused in each of you to attempt a similar undertaking and that interest might be revitalized in funding agencies and concerned groups.

Most of our lives are dedicated to helping the retarded. There are innumerable programs and techniques, most of which have come under fire at one time or another for various reasons and from various sources. Project Workout is no exception. Yet unless such effort is expanded and continued when success is realized, the initial investment of time and energy becomes meaningless in the total picture of meeting the needs of the difficult-to-employ, mildly retarded young adult. To provide opportunity to a few and to deny it to many is to indicate something less than total commitment to the welfare of the retarded. The continuance and expansion of this type of program assures not only the obvious economic and social benefits described, but also the realization of the vast body of manpower and energy which can be put to work for the community at large, and the individual in particular.